

Work Order ID 108022

108022

Page 1

October-07-13 9:06:43 AM

Item ID: 646.9812

646.9812

Revision ID:

B108022

Item Name: Lower Cutter Deflector.

Start Date: 10/07/13 Start Qty: 6.00

6

Required Date: 10/07/13 Req'd Qty: 6.00

6

Reference:

Approvals: Process Plan: MLS Date: 13-10-08 Tooling:

Date:

QC: Date: SPC (Y/N):

Date:

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
646.9800	N/C

100

0.00

100

BAND SAW

Bandsaw

Memo

0.00

Jeaspa Bandsaw

Cut Blank at 25.150"

ONE BLANK MAKES TWO PART

3 0 213-11-1

110

0.00

110

HAAS CNC VERTICAL MACHINING #1

HAAS 1

Memo

0.00

HAAS CNC vertical machine #1

1-Machine per folio FB131

DWG REV: A

FOLIO REV: AA

2- deburr and break all sharp edges

C 0 213-11-5

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 108022

108022

Page 2

October-07-13 9:06:43 AM

Item ID: 646.9812

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Lower Cutter Deflector

Start Date: 10/07/13 Start Qty: 6.00

6

Cust Item ID:

Required Date: 10/07/13 Req'd Qty: 6.00

6

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:
QC: Date: SPC (Y/N): Date:

Run Start *NR1*
Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	QC2- Inspect parts off machine FAI/FAIB	0.00							
120						6	0		13/11-5
QC	Memo	0.00							
Quality Control									
130	QC8- Inspect parts - second check	0.00							
130						6	0		13/11/05
QC	Memo	0.00							
Quality Control									
140	Outsource process-Anodize per QSI017 4.1.10.1	0.00							
140									13/11/08 (6)
Outsource4	Memo	0.00							
Outsource process - Anodize	Issue P/O to ATG : 21915								
	1- Black Anodize as per Dwg 646.9800								
	2- PRIME AS PER DWG, SEE NOTE #2								
	Certification of Conformity is required								

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 108022

October-07-13 9:06:43 AM

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Page 3

Item ID: 646.9812

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Lower Cutter Deflector

Start Date: 10/07/13 Start Qty: 6.00

6

Cust Item ID:

Required Date: 10/07/13 Req'd Qty: 6.00

6

Customer:

Reference:

Run Start *NR1*

Stop *NR2*

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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150 Receive & Inspect for Damage & Mat'l Certs 0.00

150

Packaging Memo 0.00

Packaging

151 QC5- Inspect part completeness to step on W/O 0.00

151

QC Memo 0.00

Quality Control

180: Identify as per dwg & Stock Location: CA 0.00

180

Packaging Memo 0.00

Packaging

IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV

DAS
27
9-89

13/11/22

6

13/11/25 (6)

DAS
32
9-89

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	<input type="checkbox"/>
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	<input type="checkbox"/>															

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 108022

108022

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October-07-13 9:06:43 AM

Item ID: 646.9812

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Lower Cutter Deflector

Start Date: 10/07/13 Start Qty: 6.00

6

Cust Item ID:

Required Date: 10/07/13 Req'd Qty: 6.00

6

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

190

QC21- Final Inspection - Work Order Release

0.00

190

QC

Memo

0.00

Quality Control

13/11/27 JG
ME
13-11-25

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Skid-tube <input type="checkbox"/></td> <td style="width: 33%;">Crosstube <input type="checkbox"/></td> <td style="width: 33%;">Water Jet <input type="checkbox"/></td> <td style="width: 33%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																		
Doc/Data <input type="checkbox"/>																											
Equip/Tooling <input type="checkbox"/>																											
Operator <input type="checkbox"/>																											
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Setup <input type="checkbox"/>																											
Other <input type="checkbox"/>																											
Process <input type="checkbox"/>																											
Supplier <input type="checkbox"/>																											
Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											

FAULT CATEGORY									
Landing Gear			General						
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld					
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong						
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other					
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset							
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration							
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							

Picklist Print

October-07-13 9:06:43 AM

Page 1

Work Order ID: 108022

Parent Item: 646.9812

Start Date: 10/07/13

Required Date: 10/07/13

Parent Item Name: Lower Cutter Deflector

Start Qty: 6.00

Required Qty: 6.00

Comments: IPP REV:A NEW ISSUE 12/09/10 JFS VERIFY BY: DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M7075T6B5.000X0.375 7075-T6 BAR 5.000" X 0.375"		Purchased	No			100	f	65.6286	1.048	7			

SL B-11-1

Location

Loc Qty

Loc Code

MAT049

65.6286

123218

27.4357

m126390

2.7229

m126615

35.47

*6-31

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
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Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance. <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

APICAL

INDUSTRIES, INC.

ENGINEERING CHANGE NOTICE NO. 03828

SHEET 1 OF 8

DWG NO. 646.9800

REV: NC

PREPARED BY: B. PETERS

DATE: 03/19/13

EFFECT ON DWG
☒ INC. ☐ UNINC.

DWG TITLE: DEFLECTOR

APPROVED BY:

ENGR

MFG

QC

EFF:

NEXT ORDER

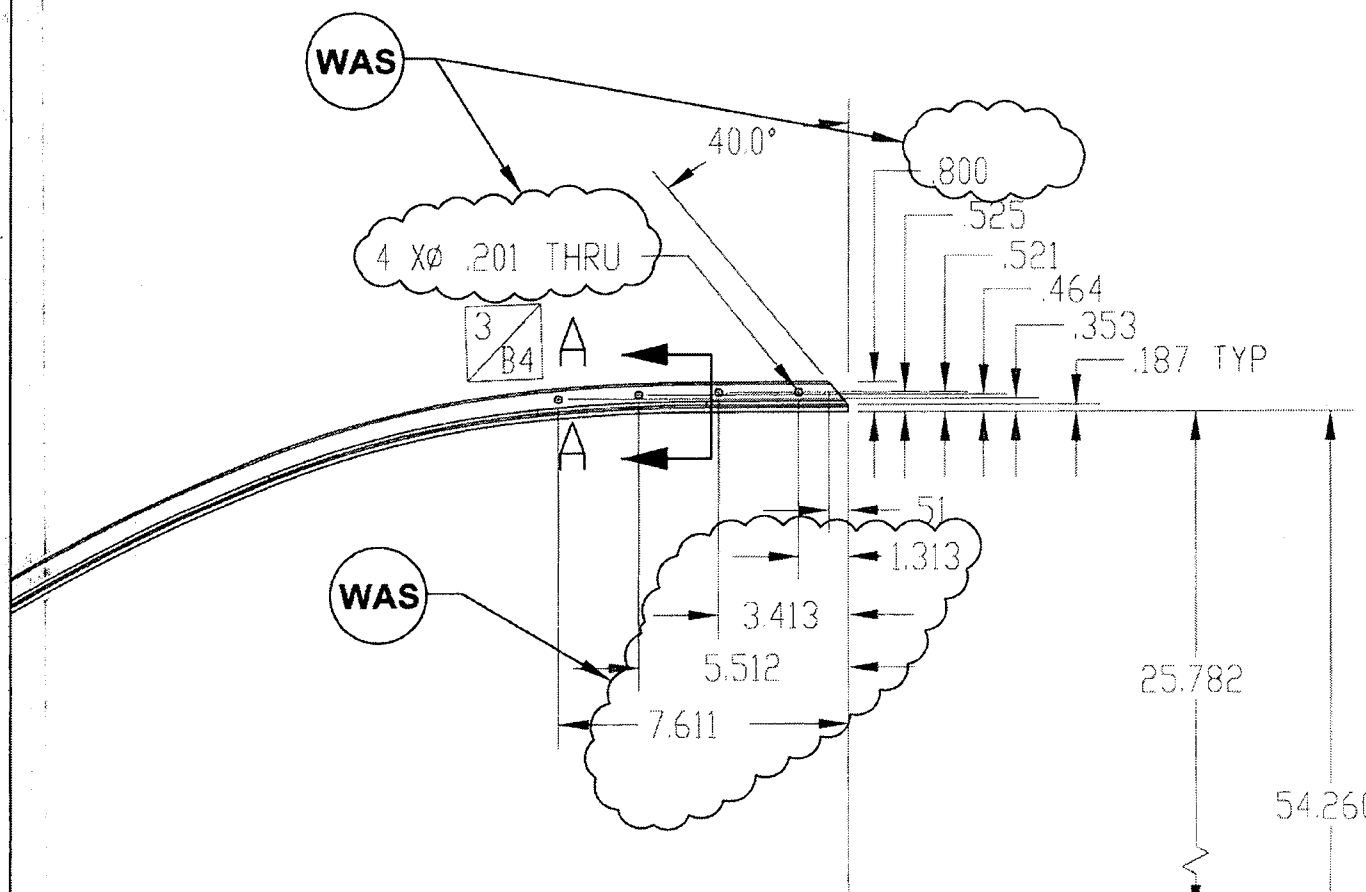
TRANSACTION CODES (TC):
A-ADD C-CREATE
R-REVISE D-DELETE

REASON: REVISED CORNER RADIUS, TOLERANCES, AND ADDED INSPECTION DIMENSIONS.

ECR:

D-13-029

SHEET 1, ZONE A5-A6 & B5-B6 WAS:



DOCUMENTS EFFECTED:

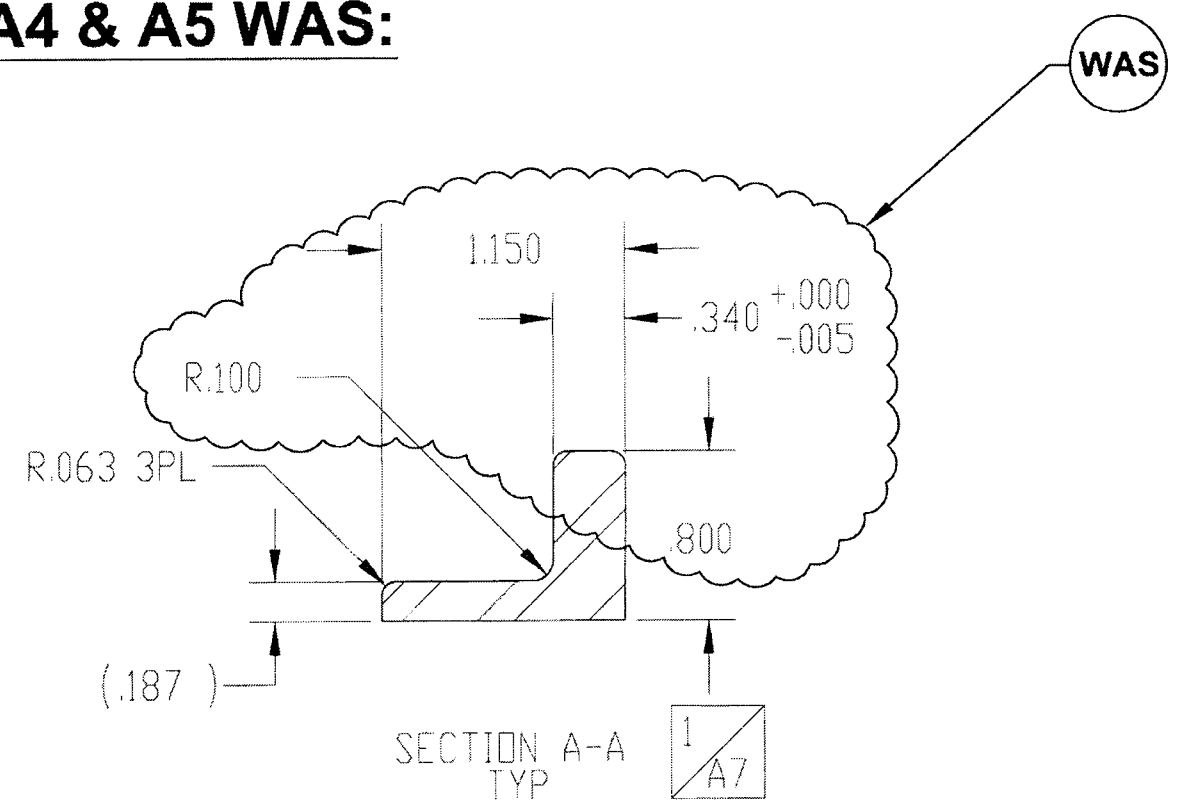
☐ MDL ☐ INSTALL INSTRU ☐ ICA ☐ BOM

CHANGE CATEGORY
☐ MAJOR ☒ MINOR

DER REVIEW REQUIRED
☐ YES ☒ NO

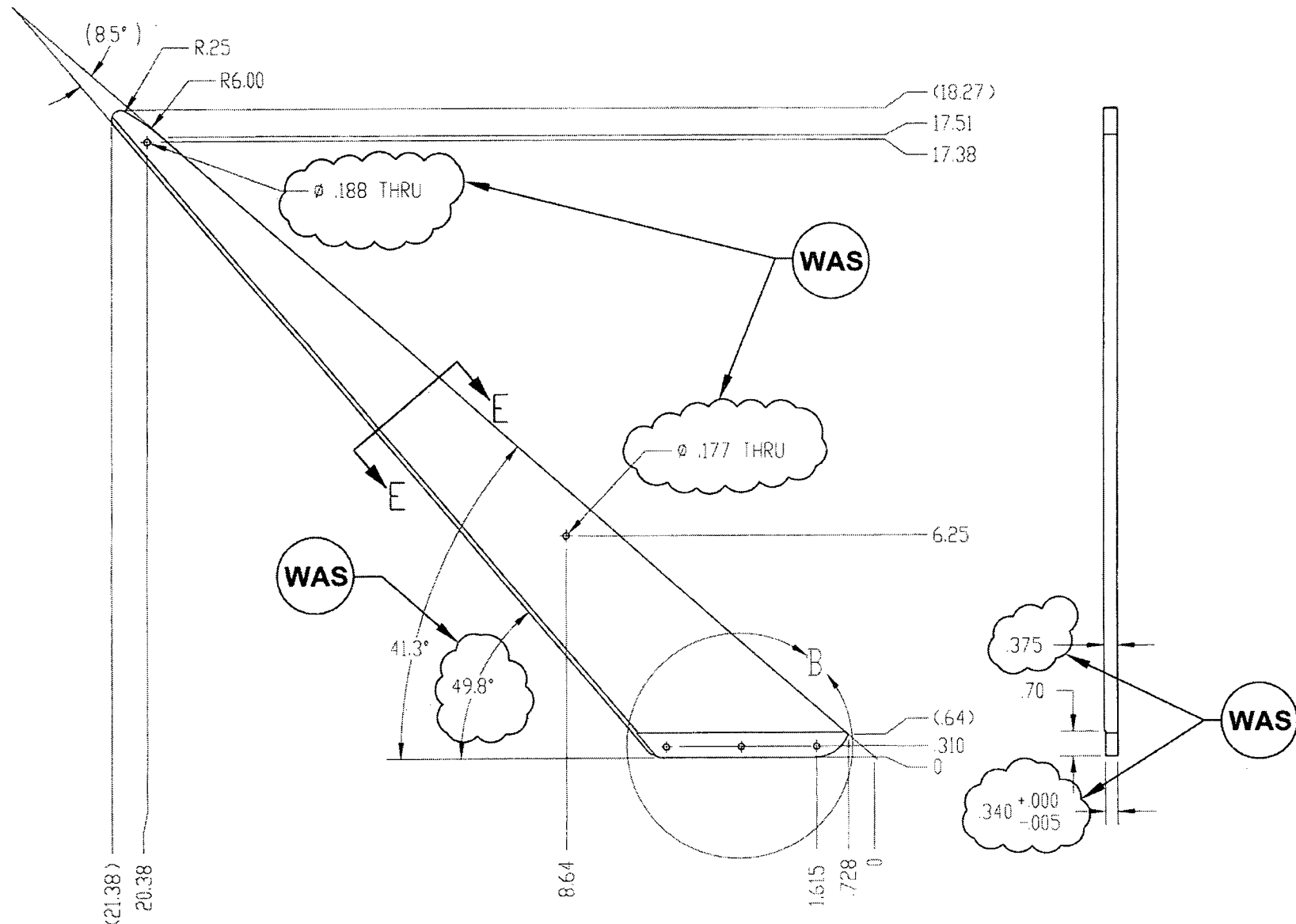
108022

SHEET 3, ZONE A4 & A5 WAS:



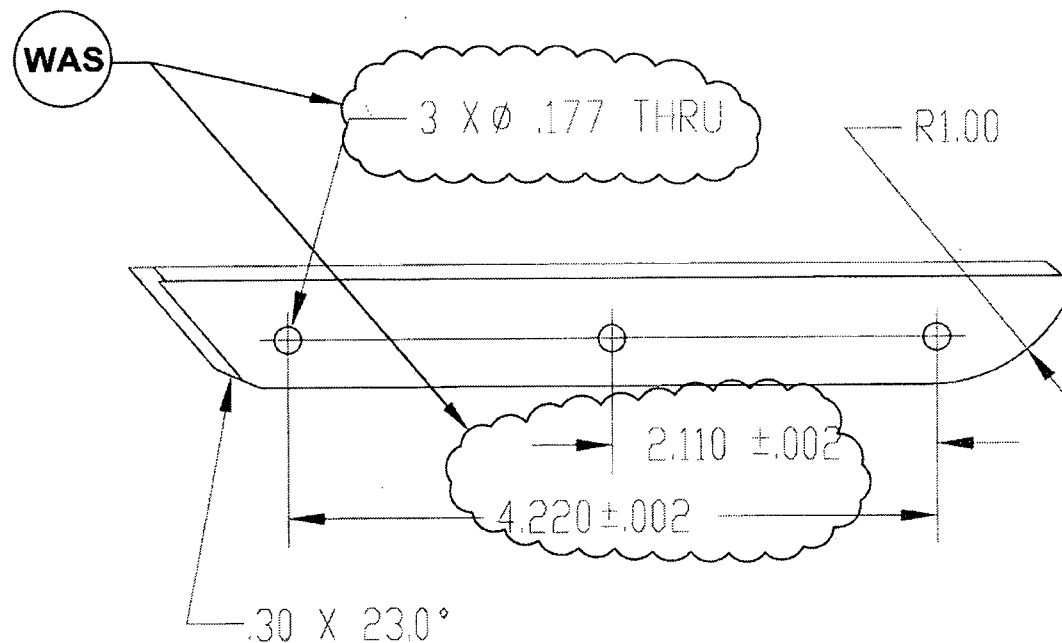
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SHEET 4, WAS:



108022

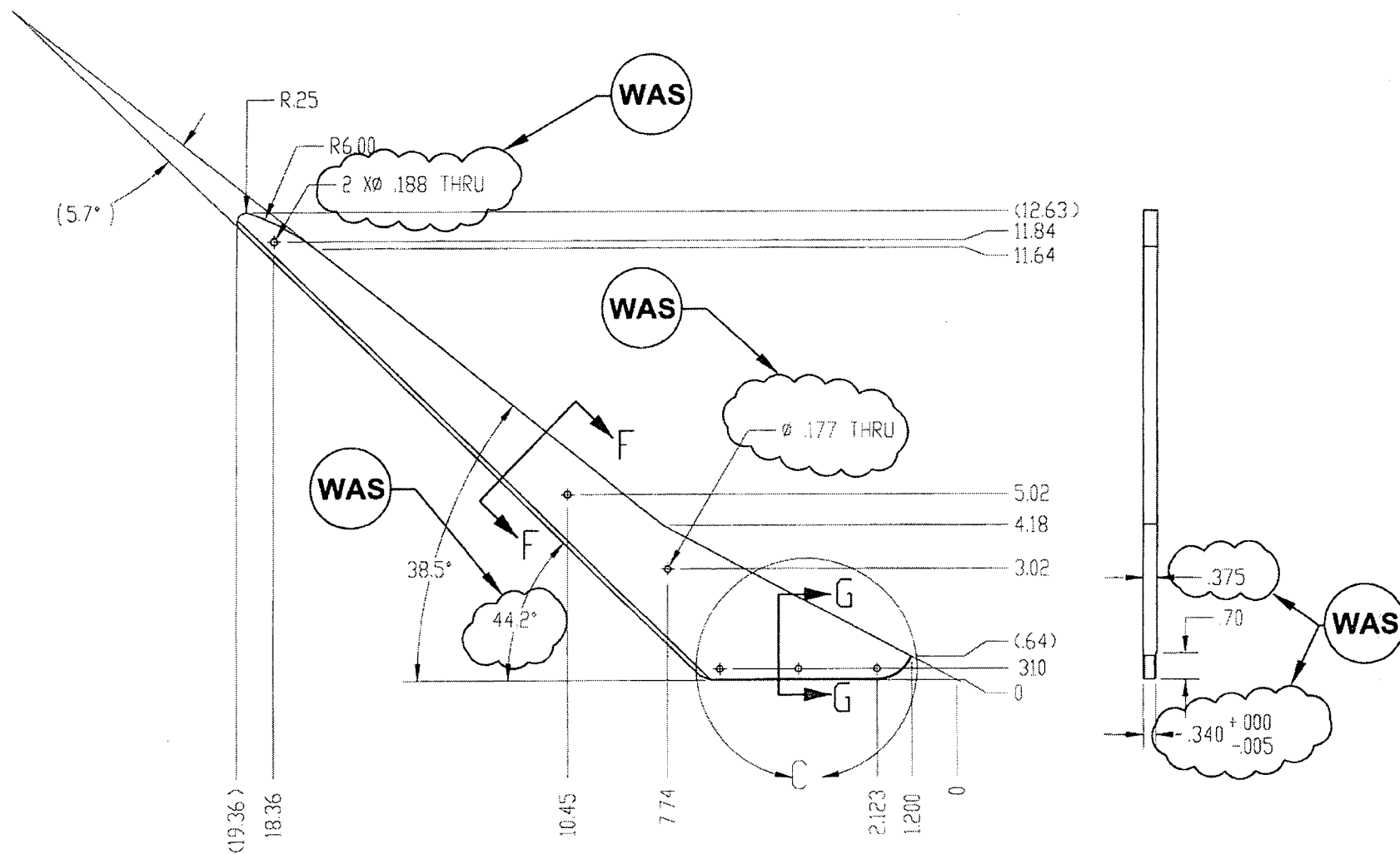
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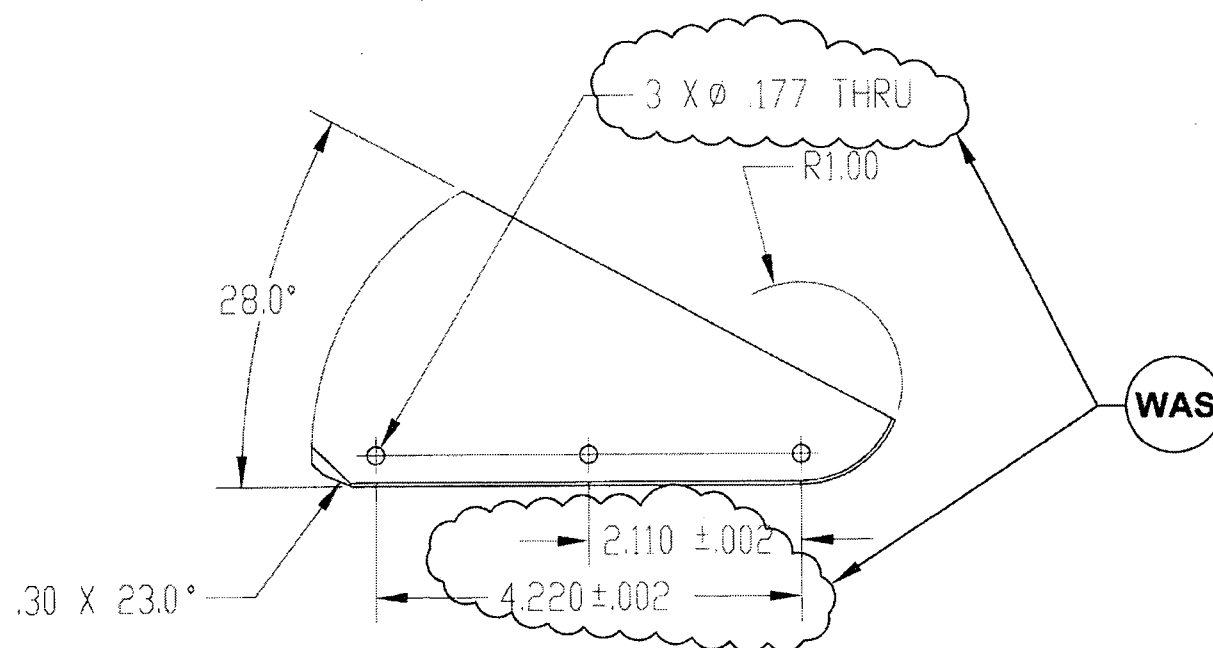
DETAIL B

108022

SHEET 5, WAS:



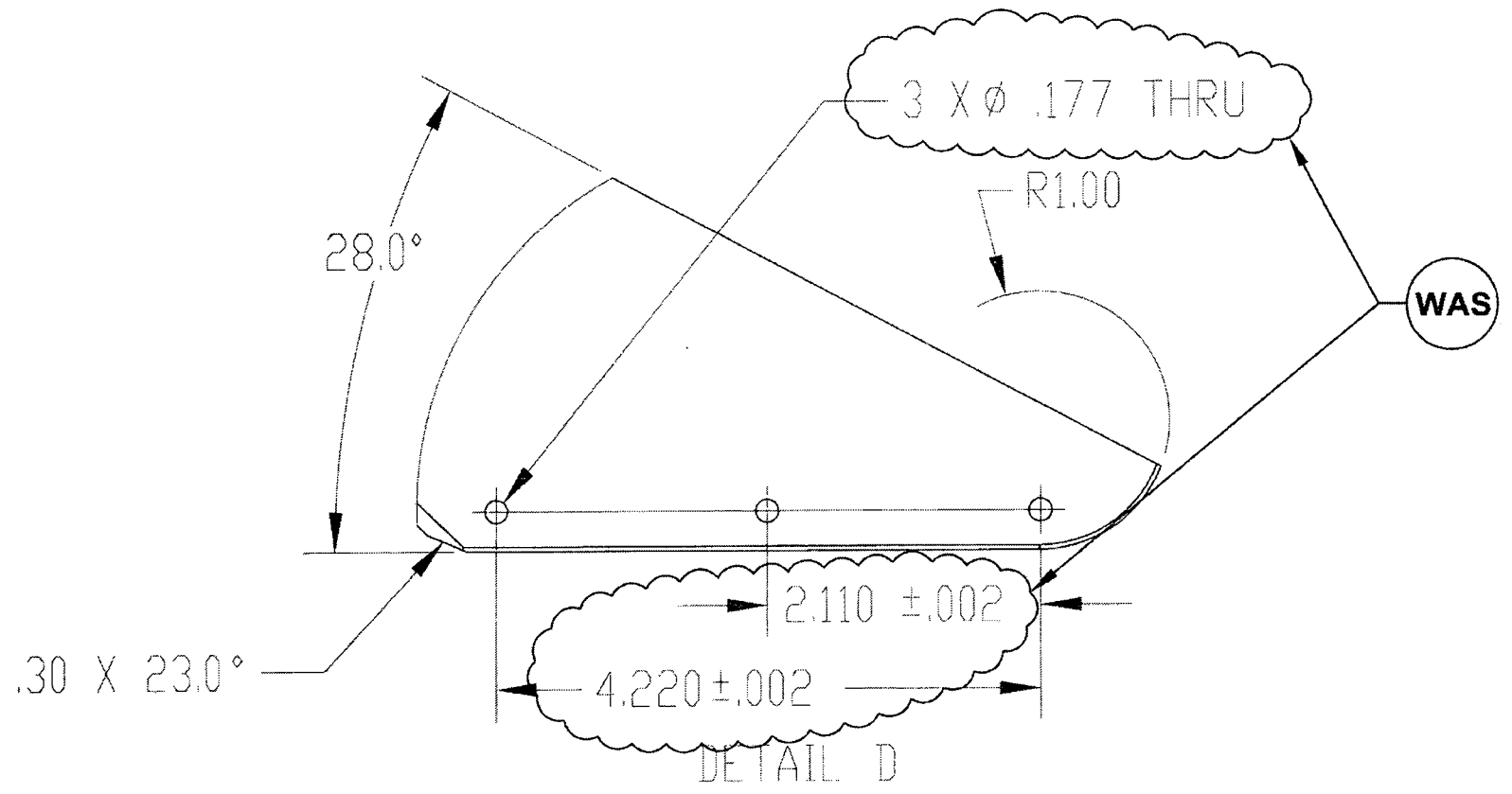
108022

SHEET 5, ZONE C8, D7, & D8 WAS:

DETAIL C

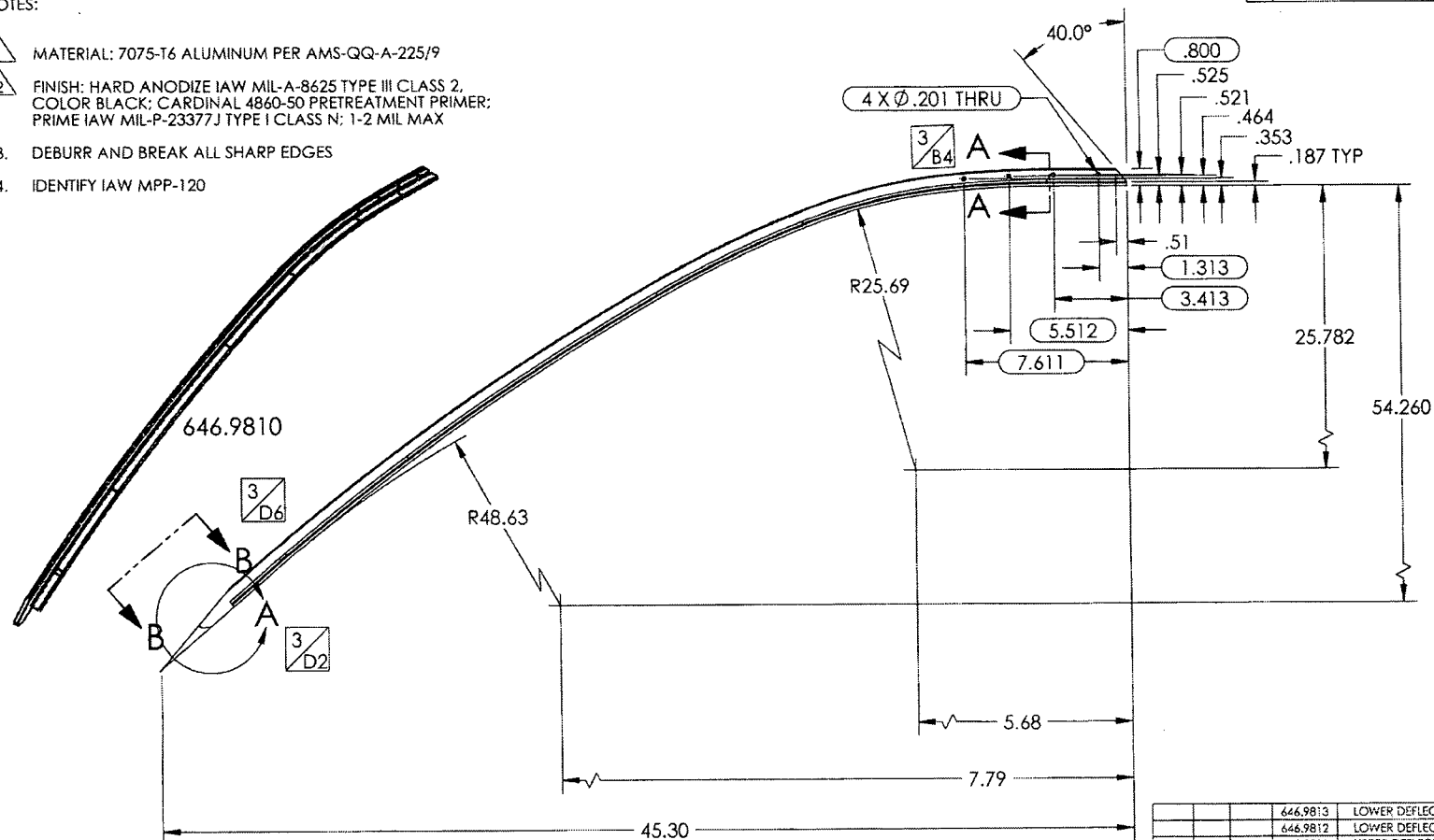
108022

SHEET 6, ZONE C6 & D6 WAS:



PERSONS			
REV.	DESCRIPTION	DATE	APPROVED
INFO	INITIAL RELEASE	04/23/09	P. BRAYO
A	INCORPORATED SON GUARD	03/17/13	P. BRAYO

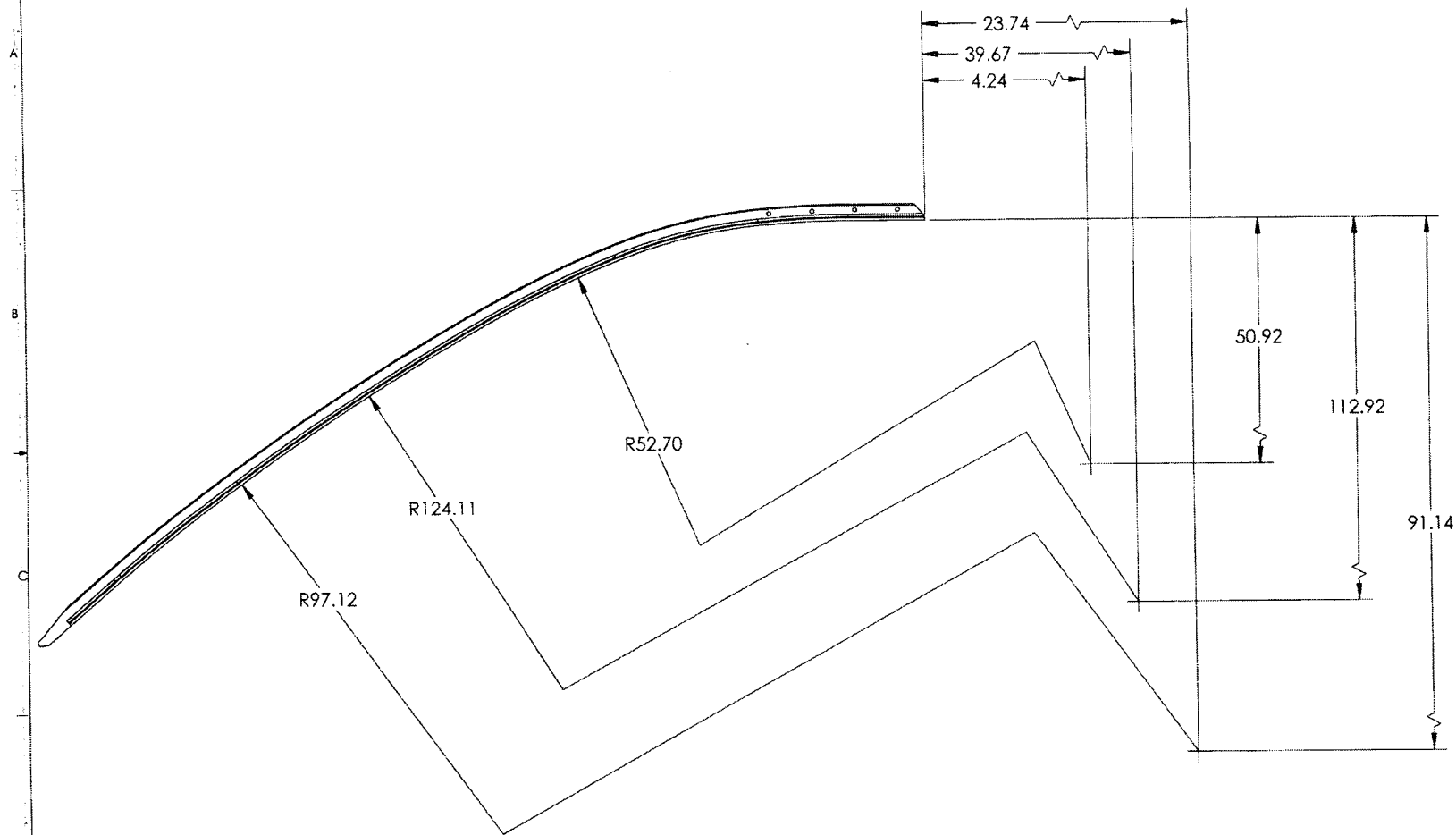
1. MATERIAL: 7075-T6 ALUMINUM PER AMS-QQ-A-225/9
2. FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III CLASS 2, COLOR BLACK; CARDINAL 4860-50 PRETREATMENT PRIMER; PRIME IAW MIL-P-23377J TYPE I CLASS N; 1-2 MIL MAX
3. DEBURR AND BREAK ALL SHARP EDGES
4. IDENTIFY IAW MPP-120



		666.9813	LOWER DEFLECTOR LOW	△	△
		666.9812	LOWER DEFLECTOR HIGH	△	△
		666.9811	UPPER DEFLECTOR	△	△
		666.9810	DEFLECTOR	△	△
	FIND #	PART NO.	DESCRIPTION	MAT'L	SPEC
QTY			PARTS LIST		
NEXT ASSY (S)			APICAL INDUSTRIES		
666.9500			2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300		
ORIGINAL DATE DWG-CA-178			14-73-00		
DRAWN BY J. JACKSON			P. BRADY		
CHECKED BY J. JACKSON			P. BRADY		
APPROVED BY J. JACKSON			P. BRADY		
REVISIONS NO			DEFLECTOR		
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 1. PLACES DIMENSIONS ±.010 2. PLACES DIMENSIONS ±.020 3. PLACES DIMENSIONS ±.030 4. PLACES DIMENSIONS ±.040			REV. A		
SHEET 1 OF 1			SHEET 1 OF 1		

108022

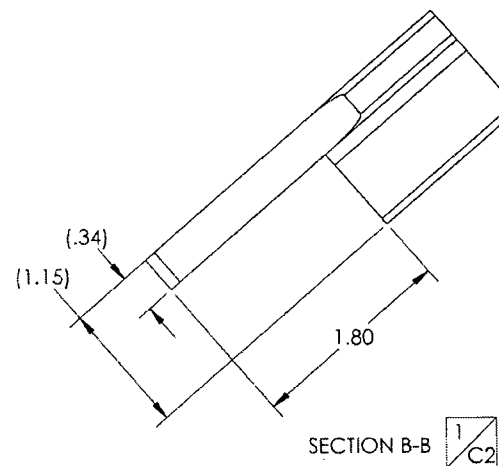
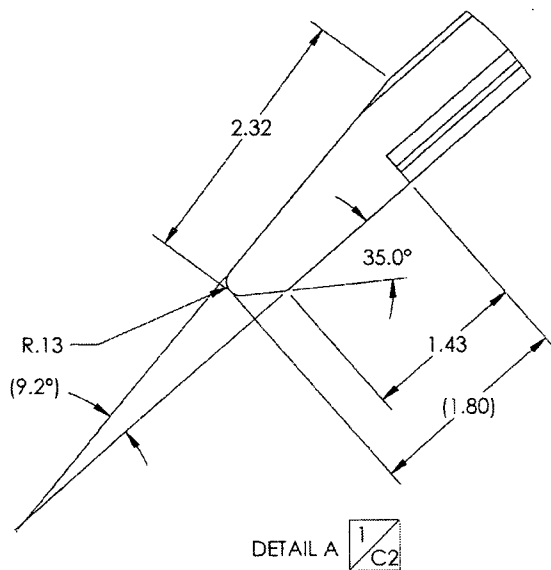
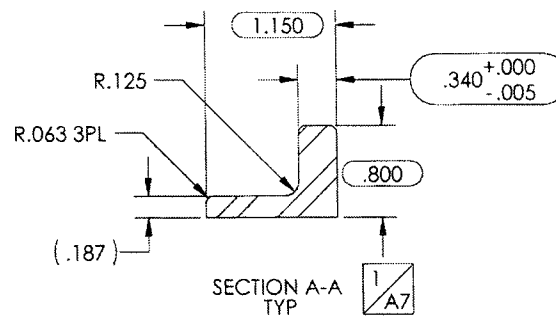
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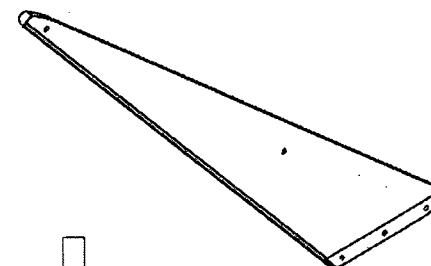
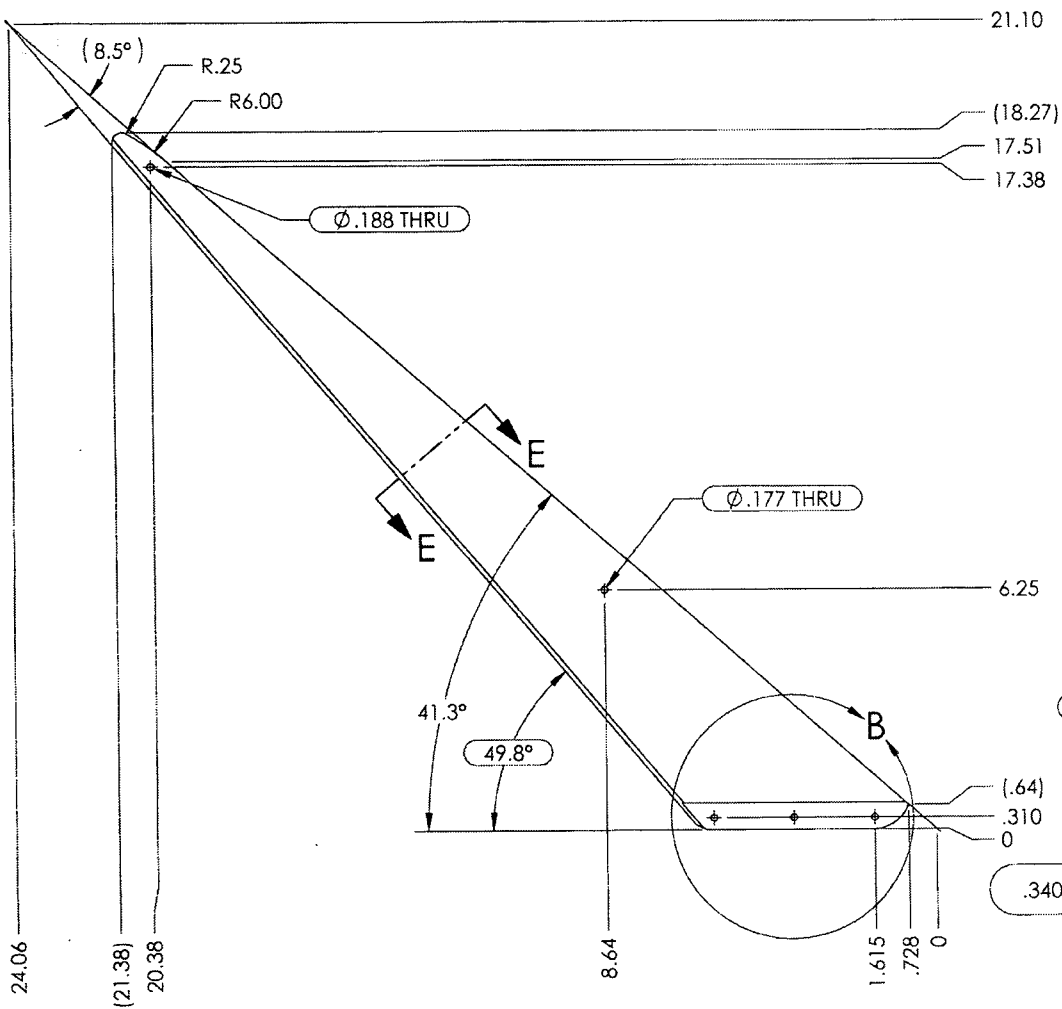
DESIGNED BY J. JACKSON	CHECKED BY P. BRAVO	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
DRAWING APPROVAL P. BRAVO		DEFLECTOR	
CONTRACT NO.		SIZE 10x14 CODE 8 DWG. NO. 646.9800	REV. A
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS ± .001 ANGLES ± .5°		SCALE NONE	SHEET 2 OF 6

108022

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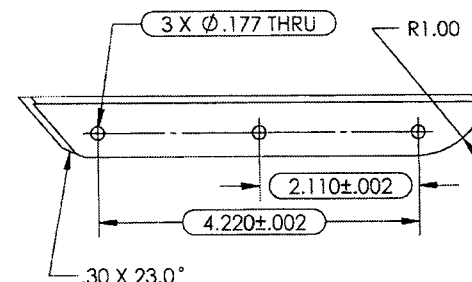
APICAL INDUSTRIES	
2608 TEMPLE HEIGHTS DR.	
OCEANSIDE, CA. 92056-3512 (760)724-5300	
DEFLECTOR	
SIZE	CAGE CODE
B	079A26
DWG. NO.	646.9800
SCALE	NONE
SHEET	3 OF 6



646.9811

.13 X 45.0°
2 PL

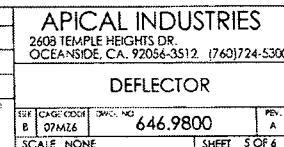
SECTION E-E



DETAIL B

ORIGINAL DATE PUC DA 151	02 23 09	APICAL INDUSTRIES			
DRAWN BY CHECKED INCHES	P. BRAVO P. BRAVO	2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA 92056-3512 (760)724-5300			
ENGINEERING APPROVAL P. BRAVO DATE		DEFLECTOR			
CENFRACIT No					
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 1. FRACTIONS ± .015 2. DECIMALS ± .010 3. ANGLES ± 1.0°		SET B	CAGE CODE 07M46	DWG. NO 646.9800	REV. A
		SCALE NONE		SHEET 4 OF 6	

108022



ORIGIN: DATE (W/DAY/YY) 04/22/05	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA, 92056-5132 (760)724-5300		
DESIGN BY: CDR/CEJF DRAWN BY: JACQUIN P BRANT	DEFLECTOR		
REVIEW APPROVAL P. BAYO 04/22/05	REV. CASH CODED DWG. NO B 07/26/06 646.9800		
CONTROLS NO	SCALE: NONE SHEET A OF A		
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE TO CENTER TOLERANCES ARE: DIMENSIONS > 10" ± .0015 3 PLACE DECIMALS ± .010 DIMENSIONS ≤ 10" ± .010			

DART AEROSPACE LTD	Work Order: 108022
Description: lower cutter deflector	Part Number: 646.9812
Inspection Dwg: 646-9800 Rev: A	Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
Ø.177	+0.005 -0.001	.178	/		Vern	2L-10
4.220	+0.002	4.220	/		-	
2.110	+0.002	2.110	/		-	
28°	+5°	28°	/		protractor	
.375	+0.010	.381	/		Vern	
.70	+0.020	.698	/		-	
.340	+0 -0.005	.338	/		-	
.13x45°	+0.020	.136x45°	/		-	
.04x45°	+0.020	.035x45°	/		-	
Ø.188	+0.005 -0.001	.188	/		-	
5.7°	+5°	5.7°	/		protractor	
12.63	+0.020	12.638	/		H-G	
11.84	+0.020	11.839	/		-	
5.02	+0.020	5.019	/		-	
3.02	+0.020	3.021	/		-	
.310	+0.010	.310	/		Vern	

Measured by: SL	Audited by: <i>[Signature]</i>	Preliminary Approval:
Date: 13-11-05	Date: 13/11/05	Date:

Rev	Date	Change	Revised by	Approved
E	10.04.14	Added preliminary approval	KJ	

[Signature] 10.04.15



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada
Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 62753

Date: 22-Nov-13

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To


DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description		
1 lot	Part: ASST 10 PCS 646.3312 (12.05) ✓ 12 PCS 646.3010 (10.25) ✓ 6 PCS 646.3310 (18.10) ✓ 2 PCS 645.3110 (10.65) ✓ 4 PCS 646.3810 (6.55) ✓ 32 PCS 646.3715 (6.70) ✓ 38 PCS 646.3718 (3.95) ✓ 6 PCS 646.9812 (22.80) ✓ HARD ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2 PRIME MIL-P-23377J TYPE I CLASS N PRICE IS PER PIECE Job: 20130724 Rev:	PO: 21915 Line:	
<p align="center">Certificate of Conformance</p> <p>A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.</p> <p align="center">ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY</p> <p>DATE: <u>22/11/13</u></p> <p>CERTIFIED SIGNATURE: <u></u></p> <p>RECEIVER SIGNATURE: _____</p>			